

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14635 / 14724

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☒ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Hillary for America

Full Name (Last, First, Middle Initial)

A. Michele Kaplan Clinard

Mailing Address 18115 27th PI N

City Plymouth State MN Zip Code 55447-1623

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2015

Transaction ID : D574

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Evelyn Sahr

Mailing Address 5619 Lamar Rd

City Bethesda State MD Zip Code 20816-1349

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2015

Transaction ID : D594

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

c. William Scott Gould

Mailing Address 6725 Honesty Dr
Usa

City Bethesda State MD Zip Code 20817-5516

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : D604

Amount of Each Disbursement this Period

500.00

Subtotal Of Receipts This Page (optional).....

1550.00

Total This Period (last page this line number only).....